REPORT OF CONTRACT PERFORMANCE OUTSIDE THE UNITED STATES

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The public reporting burden for this collection of information is estimated to average 20 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to Department of Defense, Washington Headquarters Services, Directorate for Information Operations and Reports (0704-0229), 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number.

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE ABOVE ADDRESS.

WASHINGTON, DC 20301-3060	
1. PRIME CONTRACT NUMBER (Use solicitation number when report is s	ubmitted with offer)
2. PROGRAM IDENTIFICATION (e.g., F-16 aircraft, F-100 engine, AN/APN	N-59 radar, or type of services)
3. NAME AND DIVISION OF PRIME CONTRACTOR	
4. ADDRESS OF PRIME CONTRACTOR (Street, City, State, and 9-digit Zi	IP Code)
5. NAME OF SUBCONTRACTOR OR FOREIGN DIVISION OF PRIME CO	NTRACTOR (If subcontractor, identify whether first- or second-tier)
6. ADDRESS OF SUBCONTRACTOR OR FOREIGN DIVISION OF PRIME	E CONTRACTOR (Street, City, State, 9-digit ZIP Code, and Country)
7. VALUE (in dollars) OF EFFORT PERFORMED OUTSIDE THE UNITED STATES FOR THIS ACTION ONLY. DO NOT INCLUDE AMOUNTS PREVIOUSLY REPORTED.	8. COUNTRY OF ORIGIN (Enter city and country of actual producer of supplies or firm providing services)
9. DESCRIPTION OF SUPPLIES OR SERVICES OBTAINED OUTSIDE TO FB-111; or repair of F-16 wings)	HE UNITED STATES (e.g., vertical stabilizer, F-15; Bomb Nav System,
10. NAME OF COMPANY SUBMITTING REPORT (Prime contractor for reponsecond-tier subcontracts)	ports on first-tier subcontracts or first-tier subcontractor for reports
11. NAME OF SUBMITTER (LAST, First, Middle Initial)	12. TELEPHONE NUMBER (Include Area Code)
13. SIGNATURE	14. DATE (YYYYMMDD)